

Application for Plan Examination
Michigan Department of Labor & Economic Growth
Bureau of Construction Codes & Fire Safety
Plan Review Division
P.O. Box 30255
Lansing, MI 48909
517-241-9328

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Agency Use Only

Deposit Fee: \$100.00

Authority: 1972 PA 230 Completion: Voluntary Penalty: Plans will not be reviewed	The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.
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Note: The applicant is responsible for all fees applicable to this application.

FACILITY INFORMATION				
FACILITY NAME			STREET / SITE ADDRESS	
NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH FACILITY IS LOCATED				COUNTY
CITY	VILLAGE	TOWNSHIP	of:	
SUBMITTAL				
ADDENDUM NO. _____		BULLETIN NO. _____		ORIGINAL SUBMISSION NUMBER _____
BUILDING DATA				
GROSS FLOOR AREA				
NEW BUILDING _____		ADDITION _____		ALTERATION _____ REPAIR _____
CLASSIFICATION PER BUILDING CODE				
BUILDING USE _____		CONSTRUCTION TYPE _____		NO. OF OCCUPANTS _____ AREA/FLOOR _____ NO. OF FLOORS _____
FIRE SPRINKLERS				
ENTIRE BUILDING		LIMITED AREA _____		NONE
SCHOOL OR GOVERNMENT BUILDING IS LESS THAN \$15,000.00			PROJECT SCOPE _____	
PLAN REVIEW REQUEST				
BUILDING		ELECTRICAL		MECHANICAL
BARRIER FREE		FOOTING/FOUNDATION		FIRE SUPPRESSION
				PLUMBING ENERGY OTHER _____
BUILDING OWNER				
NAME (Company or Individual)			CONTACT PERSON	
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
PROJECT ARCHITECT / ENGINEER				
NAME (Company or Individual)				MICHIGAN LICENSE NUMBER
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
APPLICANT (Note: All correspondence will be sent to this address)				
NAME OF COMPANY		APPLICANT NAME		SOCIAL SECURITY NUMBER OR FEIN (REQUIRED)
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
APPLICANT SIGNATURE (Must be an original signature)		DATE		FAX NUMBER (Include Area Code)

Instructions for Application for Plan Examination

Facility Information: Provide all requested information. Mark the appropriate box (city, village or township) and state the name of the governmental subdivision where the project is located; not the post office location.

Submittal: Indicate what is being submitted and provide the submission number. The submission number is critical when linking this submittal with a previous submission for the same project.

Building Data: Provide all requested information. The building use, construction type and number of occupants shall be as prescribed by the building code.

Plan Review Request: Mark all plan reviews desired or required.

Project Architect / Engineer: Provide all requested information.

Applicant: Provide all requested information with an original signature. All correspondence will be sent to this address, and this entity will be responsible for all fees.

Required Submittals for Plan Review

For each facility, submit completed application, \$100.00 deposit fee made payable to the **State of Michigan** and two (2) sets of plans and/or specifications with **original seals and signatures** in accordance with 1980 PA 299.

Building Code: Site plan, foundation plan, soil bearing capacity, floor plans, building elevations, building sections, framing plans, details, roof plan, roof finish schedule, door schedule, roof live and dead loads.

Electrical Code: Plans for all electrical systems using more than six (6) circuits, excepting one and two family dwellings shall include lighting layout, circuiting, switching, conductor and raceway sizes, wattage schedule, service location and riser diagram, load calculations, appropriate plans showing standard symbols of all electrical equipment.

Mechanical Code: Plans indicating heating equipment, air conditioning equipment, ductwork material and layout, fire dampers, ventilation of rooms and areas, location of chimneys and vents, piping layouts.

Plumbing Code: Site plan, floor plans DMW riser diagrams and water distribution system and roof plan. Show direction of flow, pipe sizes, grade of horizontal piping, elevations, drainage fixture unit loading of both stacks and drains in the DWV system, supply fixture unit load for the water system, branch supplies serving more than one plumbing fixture, appliance or hose outlet.

Energy Code: Floor plans, building sections, details, average annual degree days, exterior envelope component materials, "U" values of elements, "R" values of insulating materials, size and type of apparatus and equipment, energy calculations.

Upon Receipt of All Applications

Written confirmation will be sent to the applicant. Further correspondence, concerning the requested plan reviews, will be sent to the applicant and the project architect/engineer, if one is provided.

Validation Area

US POSTAL SERVICE OR DELIVERIES OTHER THAN OVERNIGHT

Michigan Dept. of Labor & Economic Growth
Bureau of Construction Codes & Fire Safety
Plan Review Division
P.O. Box 30255
7150 Harris Drive
Lansing, MI 48909

OVERNIGHT DELIVERY

Michigan Dept. of Labor & Economic Growth
Bureau of Construction Codes & Fire Safety
Plan Review Division
2501 Woodlake Circle
Okemos, MI 48864